Honorable Commissioner of Washington, D.C. 20231

ents and Trademarks

| Case | cket | No. | 1.792.00 |
|------|------|-----|----------|
| | | | |

Transmitted herewith for filing are papers related to the patent application of:

Inventor(s):.

Enclosed are:

TOMIKO ERICKSON

For:

COVER ASSEMBLY FOR HOSPITAL CARTS



| PTO | |
|---------------|-------------|
| U.S. 88666 | 21/01 |
| JC872 | 1 90 |

2 sheet(s) of drawings. An assignment of the invention to: Certified copy(ies) of the following application(s) the priority of which is hereby claimed under 35 USC §119: A verified statement to establish small entity status under 37 C.F.R. 1.9 and 37 CFR 1.27

Small Entity

The filing fee has been calculated as shown below:

Other than A

Small Entity

| | | No. Filed | <u>No.</u> Extra | <u>Rate</u> | <u>Fee</u> | <u>Rate</u> | <u>Fee</u> | | | |
|----------------------------------|---|---------------|---------------------|----------------|---------------|--------------------|----------------------|---|--|--|
| Basi | c Fee | | | | \$ 355 | | \$710 | | | |
| C Cota | l Claims | 20 - 20 | = 0 | x 9 = | 0 | x 18 = | | | | |
| on On On On On On | 1 Claims pendent claims Multiple claims presented Non-English Language | 2 - 3 | = 0 | <u>x 135 =</u> | _ | x 80 = _x 270 = | <u> </u> | | | |
| . Ε |] Please charge my Deposit Account No in the amount of \$ | | | | | | | | | |
| |] A duplicate copy of this sheet is enclosed. | | | | | | | | | |
| Fi! |] A check in the amount of $\$355.00$ to cover the filing fee is enclosed. | | | | | | | | | |
| | The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. A duplicate copy of this sheet is enclosed. Any additional filing fees required under 37 CFR 1.16. Any patent application processing fees under 37 CFR 1.17. | | | | | | | | | |
| [|] The Commissioner is here | by authorized | d to charge p | ayment | of the | e follo | wing fees during the | è | | |

pendency of this application or credit any overpayment to Deposit Account No.

] Any filing fees under 37 CFR 1.16 for presentation of extra claims.

] Any patent application processing fees under 37 CFR 1.17.

A duplicate copy of this sheet is enclosed.

pursuant to 37 CFR 1.311(b).

FOR: MALLOY & MALLOY, P.A. 2800 S.W. Third Avenue Historic Coral Way Miami, Florida 33129

(305) 858-8000

James F. Wetterling, Jr. Reg. No. 31,440

] The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance

Peter A. Matos Reg. No. 37,884

Jennie S. Malloy Reg. No. 37,670 John Fulton, Jr. Reg. No. 46,716

The PTO did not receive the following list d item(s) A CLeck OF

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Tomiko Erickson

Serial No.:

Filing Date:

June 20, 2001

For:

COVER ASSEMBLY FOR HOSPITAL CARTS

2800 S.W. Third Avenue Historic Coral Way Miami, Florida 33129 June 20, 2001

Honorable Commissioner of Patents and Trademarks Washington, D.C. 20231

Dear Sir:

CERTIFICATE OF EXPRESS MAILING

CERTIFY that this correspondence is being deposited by United States Express Mail, Label No. EL-053-335-010-US, in an envelope addressed to: Commissioner of Patents and Trademarks, Washington, D.C. 20231, this 20th day of June, 2001. .

Respectfully submitted,

MALLOY & MALLOY, P.A. 2800 S.W. Third Avenue Historic Coral Way 33129 Miami, Florida (305) 858-8000

g. No. 37,670